

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>lw</i>	<i>68904</i>	<i>8/31/00</i>
O.I.P.E. CLASSIFIER		<i>49652</i>	<i>9-200</i>
FORMALITY REVIEW		<i>71176</i>	<i>10/13/00</i>
RESPONSE FORMALITY REVIEW			<i>12/19/02</i>

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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